

PRINTER RUSH
(PTO ASSISTANCE)

Application : 09/689139 Examiner : Rayford, S GAU : 1772
From : [Signature] Location : IDC FMF FDC Date : 02-10-05
Tracking # : 06090271 Week Date : 04-25-05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>12-29-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: ① Improper Dependency: Original claim 32 depends upon canceled original claim 31. Please Resolve. Also, claim 10 original depends upon claim 35 not 23.

Thank you
[Signature]

[XRUSH] RESPONSE: _____

INITIALS: